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ABSTRACT

The need for and development of a program in English as a Second Language (ESL) and functional English literacy for nursing home workers are outlined, and suggestions are offered for others desiring to start such a program. Anecdotal information and a needs assessment, in combination with Massachusetts state standards for nursing home workers, led to the design of an instructional program for employees of two nursing homes, one unionized. Characteristics of the 34 participating students, program rationale, and what has been learned from the experience are described briefly, and the remainder of the guide outlines the process, design, and content of a comparable program. Information is included on choosing an instructional provider, recruiting and assessing students, selecting teachers and coaches, and trouble-shooting for attitudinal, racial, and cultural problems that may arise. The last section provides a sample ESL lesson, an extensive nursing home vocabulary list, and a list of adult literacy, workplace education, and long term care resources. (MSE) (Adjunct ERIC Clearinghouse on Literacy Education)

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# ENGLISH AS A SECOND LANGUAGE

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## Helping Employees To Learn

AN INFORMATIONAL MANUAL FOR NURSING HOMES

FL800102



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# ENGLISH AS A SECOND LANGUAGE

## HELPING EMPLOYEES TO LEARN

This manual was prepared as part of a project funded by the Executive Office of Labor through the Metro South/West Employment and Training Administration.

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This manual and the project on which it was based could not have happened without the enthusiastic support of the administration, staff, and ESL students of the two nursing homes involved in the project. They are:

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June, 1988

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# NURSING HOMES AND THE THREE R'S

By Lloyd David

CASE #1

The job in the housekeeping section of the Grey Panthers Manor requires little or no reading instruction. The supervisor can show the employee how to do the work and can observe that everything is being done well. The supervisor informs the personnel department that there is an opening and waits for people to apply. The company is located in an area that has a very low unemployment rate. All the people who apply for this job are from other countries and speak either Spanish, Haitian French, or Portuguese. The supervisor is distraught, but has no choice. The man from Haiti is selected since he has some experience in a similar job. The supervisor speaks no French, but there is someone from Haiti in another area of the facility. Everything works out fairly well, but the supervisor decides to color code most everything just to be safe.

CASE #2

A new supervisor is hired in the Home on the Park. She begins to rely on one of the older workers who has been working for this company for six years. The worker is very dependable and has a good attitude when asked to take on a new responsibility. The supervisor would like to promote the worker to a higher level position which would require some additional training. The worker insists that he is happy where he is and does not want the new job. The supervisor cannot understand why

since it pays more, and she is certain persistence is causing problems between them and is creating tension on the job. One day the worker calls in that he is quitting since he found another job doing the same thing in another company. The supervisor is very depressed. She finds out from another worker that the man was afraid to take the course since he had never graduated from high school, even though this was not a requirement. The other worker felt that the man probably could not read very well since he always was making excuses when asked to read. The supervisor was shocked.

CASE #3

A worker in the kitchen at Mountain View Nursing Home was asked by his supervisor to make a cake using a particular recipe. The worker had never done this alone and the supervisor was in a meeting. The recipe called for 3/4 of a cup of water. The worker read the recipe as 3 - 4 cups of water since he did not know fractions. He decided to play it safe and poured 3 1/2 cups of water into the batter. He put the cake in the oven for 45 minutes as stated in the recipe. At the end of the time, he found that the cake was boiling and had not baked enough. When the supervisor returned from the meeting three hours later, the cake was still not done.

These are examples of problems that may occur in a long term care facility when a person is not functionally literate in our society. The definition of literacy keeps changing with the technical growth of our society. At the turn of this century, a

literate person was one who could write his/her name. An educated person was one who could read the Bible. By the end of World War II, a person needed to be able to read at a 6th or 8th grade level in order to perform adequately on the job. Today many jobs require a high school level of reading.

The Massachusetts Department of Education defines the term functionally literate as the ability "to read, write, comprehend, compute, think critically, problem solve, and communicate in English well enough to meet individual goals as family members, workers, and citizens."

This definition, when applied to a nursing home, requires that all employees need to be functionally literate, from the support staff to the administration and professional staffs. A long term care facility deals on a daily basis with life and death issues. A mistake by a dietary worker can have fatal consequences. If a maintenance worker cannot read the instructions for the correct use of cleaning solutions, the results can be harmful to the particular worker and costly to the establishment. Nursing assistants, who provide the direct care to the patients, must at all times be able to think critically and to solve problems dealing with the care of a particular patient.

There are many problems associated with the functionally illiterate worker. The first that automatically comes to mind is the inability to communicate directly with either the supervisor, other staff or the patients. This lack of communication skills can be illustrated by both the inability to

comprehend written language and/or the inability to speak and understand spoken English. Nursing homes in Massachusetts are forced to hire more and more persons whose first language is not English, due to the labor market situation in the state. This situation presents innumerable difficulties in the effective operation of the facility, since in addition to language problems, there are often cultural differences which compound the issue. An example of this situation occurred in a nursing home west of Boston. A resident asked the nursing assistant not to wash her hair since she had her hair washed and set the day before. The nursing assistant was from Haiti with limited understanding of English. She had been told by her supervisor to wash the resident's hair when bathing. The nursing assistant washed the resident's hair. This caused a great deal of aggravation on the part of the resident and her family.

A second problem is presented by the English speaking employee whose educational deficiencies are often masked. This person cannot admit to an inability to read effectively and usually attempts to mask this problem. Since the supervisor is unaware of this, when mistakes are made the worker is assumed to be incompetent. In almost every instance, the individual who has not completed high school suffers from a lack of self-confidence and lowered self-esteem. Thus, when a judgment call is required, the person may be too scared to do so. The results may have serious implications for the nursing facility.

What are some of the options for the nursing facility faced with the problems of a work force that has a need for improving basic communication skills? There are several: first, the nursing facility can suggest to the employee that he/she enroll in a course at a local school or community center. Depending on where the person lives, this may or may not be possible. In Massachusetts the need far exceeds the availability of programs, since there are over 1.1 million adults (30% of the population) who have not completed high school. The number of persons enrolled in state supported programs is about 45,000. Thus only 3.5% of the population with inadequate basic skills is being served. Also, the person may not be able to attend classes due to other commitments, such as family or a second job. And, the programs may be too general and not geared to the nursing home industry.

A second option is that the nursing facility can set up classes in the facility itself or a neighboring institution. These classes may be on company time, split between the company and the worker's time, or totally on the worker's own time. They tend to be more geared to the needs of the facility and can incorporate specific issues. For the individual, traveling to the class may not be a problem since the classes may be held at the work site itself.

The costs of on-site programs to the nursing facility are greater than the other programs, but the benefits are often more direct. Those facilities that have been involved with the work place literacy programs often find that turnover among workers

ho participate is less than those in comparable positions. Thus retention of workers is increased. Also programs have impacted on recruitment of new workers, since the decision of where to work may be made based on other factors besides wages, since salary and wages between similar institutions tend to be the same. Finally a major benefit is the change in attitude and motivation on the part of workers who have been selected and participate in workplace literacy programs. The people feel proud that their employer believed in their ability to perform the job and valued their service to provide them with a benefit which they need and esteem. The cost of the program can become negligible when compared to the goodwill that is generated among the workers.

Every person wants to be able to feel that they can accomplish something in life. Most workers in long term care facilities have a strong commitment to helping people. They have chosen to work in a field that is very demanding and requires patience and care. Too often a worker has the potential to assume a more demanding role that requires more education and training, but the person does not have the basic skills or the confidence to enroll into a program. Many years ago in the United States, it was decided that a child had to attend school until age 16. It was believed sufficient that a person have a high school diploma. Today this is no longer true. Occupations change constantly and continuing education is now the need as well as the rule. Workplace education programs are the way that a man or woman with potential, ability, motivation, and desire--

but lacking in the basic skills of communication and computation--can acquire those skills in a manner and situation that is not demeaning and has meaning for his/her life.

## PROJECT BACKGROUND/NEED

In 1987, the Massachusetts Long Term Care Foundation, a research and education center in Dedham, Massachusetts, requested state funding to develop and implement a workplace English as a Second Language program in four nursing homes. Due to limited fund availability, the project was funded at a lower than requested level, and hence was able to be offered in only two nursing homes. The experience gained during the first year of the project has led the Foundation to believe that this is a model which can be replicated in many of the 550 nursing homes in Massachusetts, as well as in nursing homes in other states.

The Foundation's interest in this project emerged as a result of its concern with the critical shortage of qualified personnel in nursing homes, and with the problems facing nursing homes as a result of non-English speaking and/or non-literate staff. Surveys conducted in 1986 indicated that up to one-third of all nursing homes faced significant problems with language and/or literacy skills of staff, problems which had profound impacts on the nursing homes' capacities to maintain an acceptable level of quality of care for residents. More recent anecdotal evidence indicates that because of the labor shortage, nursing homes are hiring staff, sometimes into direct caregiving positions, whom they would never previously have considered because of their inability to communicate and follow directions. Without intensive on-the-job training, including literacy and language training, these employees are destined to fail, and will probably leave the nursing home for yet another in a series of

low-level, low-paying jobs. In 1987, it was estimated that for every 100 employees, 90 people left within the year. (1987 Massachusetts Federation of Nursing Homes Wage and Benefits Survey results.)

Nursing homes, unlike other health care settings, are residential; they provide a home for frail elderly who typically have no other home and often, no surviving relatives. The nursing home must provide an atmosphere in which all of the spiritual, social, medical, and nursing needs are met--needs of a population that is often confused, disoriented, and in need of constant monitoring. Communication among all staff and residents is essential.

With this in mind, the Foundation became a participant in the Massachusetts Workplace Education Program, a joint initiative of the Executive Office of Labor, the Division of Employment Security, and the Department of Education, in association with the Commonwealth Literacy Campaign. Funding for the Foundation's project was channeled through the Metro South/West Employment and Training Administration in Norwood, Massachusetts.

Before applying for funding, the Foundation sent letters to all 100 nursing homes in the area served by Metro South/West, inviting them to an informational meeting about the potential availability of nursing home-based adult literacy programs for employees. At the time, the Foundation thought that there would be interest in adult basic education skills, possibly leading to a high school diploma or its equivalent (GED) for nursing assistants who would be facing increased training and competency

evaluation because of a new law requiring 60 hours of training for this role. Career advancement (for example, future eligibility for LPN training) was also seen as an outcome for participants. When attendees at the meeting were informed that both English and non-English speaking employees were eligible for education and training services, the representatives of the four nursing homes present unanimously identified the need for English as a Second Language training for low level (kitchen, laundry, housekeeping) employees rather than basic literacy for English speaking employees.

The Foundation then agreed to contract with Continuing Education Institute (CEI), a non-profit learning provider with substantial experience in providing ESL and adult basic education programs in health care as well as non-health care settings. CEI's role would be to develop curriculum and hire a project coordinator and teachers for the project.

The nursing homes interested in the project agreed to paid time off for employees to attend classes (up to four hours/week), some kind of "career ladder" for participants, use of classroom space, involvement of the home's staff development coordinator, and participation in advisory committee meetings. They also agreed to allow the participation of instructional personnel in development of workplace-related curriculum, and to the involvement of nursing home residents as tutors.

One of the nursing homes was unionized, and a union representative from the United Food and Commercial Workers Union, Local 1445, attended the first informational meeting the

Foundation held prior to submission of the project application. She was instrumental in encouraging the nursing home's administration to participate in the project, supported the Foundation's request for state funding, and encouraged employees to take advantage of the ESL training.

Metro South/West Employment and Training Administration staff met with Foundation and CEI staff several times, giving technical assistance and encouraging the Foundation to go ahead with the funding request.

As mentioned earlier, the Foundation received only enough funding to carry out this project in two nursing homes instead of the originally targeted four. One was a unionized 185-bed SNF and ICF in Norwood which changed hands during the project start-up. All staff except the administrator stayed on and remained extremely enthusiastic about the project. There were initially ten students in the class, all but one Haitians from Dorchester who spoke French and/or Creole. The other was a Polish woman who had been in this country for over thirty years, and who had worked at the nursing home since it opened.

The second nursing home was a 196-bed SNF and ICF in Marlborough. It had strong administrative interest in the project from the start, but had turnover problems among low level staff that caused the number of students in the class to fluctuate widely from week to week. The class finally stabilized, in part because of new employees who sought employment at the nursing home specifically because the ESL class was available.

## Demographic Information *

| Primary Language | No. |
|---|---|
| French/Haitian Creole | 12 |
| Polish | 1 |
| Portuguese | 13 |
| Spanish | 7 |
| Yugoslavian | 1 |

| Nationality | No. |
|---|---|
| Haitian | 12 |
| Polish | 1 |
| Brazilian | 13 |
| Dominican | 1 |
| Mexican | 2 |
| Puerto Rican | 3 |
| Salvadorian | 1 |
| Yugoslavian | 1 |

| Job Titles | No. |
|---|---|
| Kitchen aide | 9 |
| Nurses aide | 18 |
| Laundry aide | 4 |
| Housekeeping/Floor care aide | 3 |

| Wages | No. |
|---|---|
| $5.00 - $5.50 | 3 |
| 5.50 - 6.00 | 12 |
| 6.00 - 6.50 | 7 |
| 6.50 - 7.00 | 9 |
| 7.00 - 7.50 | 2 |
| 7.50 - 8.00 | 1 |

| Gender | No. |
|---|---|
| Male | 13 |
| Female | 21 |

| Age in Years | No. |
|---|---|
| 18 - 22 | 9 |
| 22 - 25 | 4 |
| 25 - 30 | 8 |
| 30 - 35 | 6 |
| 35 - 40 | 1 |
| 40 - 45 | 1 |
| 45 - 50 | 1 |
| 50 - 55 | 2 |
| 55 - 60 | 0 |
| 60 - 65 | 0 |
| 65 - 70 | 1 |

* All program participants through April 1988

## Possible Benefits to Nursing Home--Why Do This at All?

-- Make available a larger pool of workers. Nursing homes may be able to consider hiring workers whom they would otherwise have turned away.

-- Having an ESL program may act as a recruitment tool itself.

-- Reduce employee turnover because ESL classes at work help employees understand and carry out their jobs, make them eligible for promotions or for different jobs, and show them that management is willing to make an investment in them.

-- Reduce supervisory time. Less time spent trying to explain, direct, and monitor.

-- Increase quality of care, increase resident and employee safety.

## What has been learned?

-- That the need is greater than anyone anticipated.

-- That classes on work time are more apt to succeed than classes on non-work time.

-- That recruiting students who have worked at least for a while in the nursing home is better than assigning brand new employees to the class, unless the reason the employees sought work at the nursing home is because they had heard about the availability of ESL classes.

-- That first line supervisors must buy into this at least as much as administrators do. Students must be allowed to attend the classes and must be given support and encouragement by those most closely supervising them.

More specific information can be found in the next section, **HOW TO GO ABOUT STARTING AN ESL PROGRAM IN A NURSING HOME.**

## HOW TO GO ABOUT STARTING AN ENGLISH AS A SECOND LANGUAGE PROGRAM IN A NURSING HOME

### The Process

#### Choosing a Learning Provider

The nursing home's first task, after deciding that an English as a Second Language program will be conducted for nursing home employees, is to choose a learning provider. The learning provider should be:

1. Experienced in running job-specific English as a Second Language classes.

2. Familiar and sensitive to the particular language needs of nursing home employees.

3. Able to develop curricula and materials to meet the specific goals of the long term health care facility, the supervisory staff and the employee program participants. Because workplace English as a Second Language (ESL) is relatively new, there are no nursing home specific ESL texts available on the market. Therefore, curricula and materials must be tailored for the client. (Please see section on Curriculum and Materials Development.)

4. Able to provide all educational staff needed to run the program: a program coordinator, a curriculum specialist, and ESL instructors.

5. Flexible enough to adapt the program to meet unexpected changes if necessary.

6. Able to work in cooperation and in conjunction with the nursing home staff to avoid major inconveniences.

## Implementing the Program

The first step is for the nursing home administrator to recruit an interested and committed staff member to coordinate with the Learning Provider. This designated contact person will provide the access to the nursing home that the Learning Provider must have in order to design and implement the program. This role should be made clear to all parties concerned so as to avoid confusion as to whose responsibility it is to answer questions, schedule meetings and arrange appointments.

It is imperative that the contact person have a positive attitude toward the program and be committed to the tasks ahead as this can be a time-consuming role. Staff members most appropriate for this role are persons who have authority, influence, sensitivity, enthusiasm, and a good rapport with the supervisory staff and other employees. Possible candidates could be the staff development person, the head nurse or any department head possessing the above qualifications.

Next, the Learning Provider should meet with the nursing home administrator and the designated contact person from the nursing home staff to discuss:

1. Felt needs and goals of the facility regarding ESL instruction for the employees:
   -- program goals
   -- who will be served?

2. Size of the program:
   -- how many classes?

3. Duration of program:
   -- starting and ending dates

4. Tentative time and days of classes subject to the needs of the supervisory staff. It is recommended that classes meet twice a week for a two-hour period each time. It is important that supervisors be given a voice in determining the days and time of the program so as to lessen the impact of having employees off the floor or out of a department at a given time.

5. Location of class:
   -- physical space to be used at the worksite (It is recommended that classes be held at the worksite which will increase class attendance and lessen the impact of employees adding another routine to their already busy schedule.)

6. Equipment:
   -- chalk or white board
   -- overhead projectors (optional)
   -- flip charts
   -- TV/VCR (optional)
   -- photocopy machine

7. Access to the facility by the Learning Provider to conduct preliminary program design tasks.

8. Student recruitment:
   -- who is responsible?
   -- how will it be accomplished?
   -- when will it be done?

9. Paid release time for participants

10. Language coaching or tutoring
    (Please see section on Language Coaching.)

This meeting should conclude by setting a firm date and time to hold an orientation for supervisors and department heads during company time. The designated contact person should make the arrangements.

Third, the Learning Provider should hold an orientation for all supervisory staff affected by the program. The goal of this orientation is to introduce the supervisors to the Learning Provider and to give an overview of the program. It is a time to discuss the role of the nursing home in the ESL program, as well as the roles of each individual supervisor. It is also a very

important opportunity for supervisors to voice opinions concerning the language needs of the limited English employees with whom they work and to explore their concerns about having a program and how it will affect their daily work routine. This feedback from supervisors is key in determining program goals.

In addition, the attitude of the supervisors is of great importance to the success of the program. If supervisors resent their staff being taken off the shift to attend an ESL class, there will be undue pressure placed on the program participants which could result in higher than expected absenteeism and possibly program dropouts. On the other hand, if supervisors are enthusiastic and supportive of the program, they can provide ongoing encouragement to program participants and will be more willing to cope with having staff taken off a shift in order to attend class. Furthermore, supervisors can plan an active role in identifying possible candidates for the ESL class.

The fourth step is Recruitment of Students. It must be made clear to all employees from the onset that participation in the ESL program is positive and in no way threatens their job security or stigmatizes the employee in any way. (This is another reason why the support and cooperation of the supervisors is important.) A positive attitude on the part of the English speaking staff members will go a long way to bringing this message across.

In addition, the convenience of the location and time for the class will play an important role in recruitment. Classes held on-site are most convenient in that they reduce travel time

and the temptation to "just go home" instead of attending class. Ideally, classes would be held during the work shift. Another suggestion is that classes be held during the two-hour period that ends and begins a shift. For example, classes for employees who work from 7 am to 3 pm and 3 pm to 11 pm could be held from 2 pm to 4 pm. This way, the employer donates one hour of paid release time to the employee and the employee donates one hour of his/her time unpaid to the program. This provides an added incentive while requiring the employee to contribute and make a commitment. If neither of these arrangements are possible, a schedule which alleviates the most problems for the participants as well as the facility should be implemented. The goal is to provide a convenient situation so that employer and employee needs are both satisfied as much as possible and to alleviate stress on all concerned.

Recruitment Techniques

There are several readily practiced ways of recruiting students. The method used will be determined by the size of the facility, access to nursing home staff and their willingness to cooperate and participate in the recruitment process, and the time available to recruit. Here are a half dozen suggestions:

1. Ask department heads and supervisors to recommend candidates and to inquire as to their interest in the program. (Be sure, however, that the supervisors don't just list workers whom they feel should attend without asking the individuals first. There may be many reasons why someone could not attend such as having to leave for a second job, home and family concerns, transportation constraints, lack of interest in the program or feeling satisfied with their present level of communication in English. No one should be forced to attend as this will have a detrimental affect on the individual's learning capacity and the atmosphere of the entire program.) After

supervisors have informed employees about the program, a list of interested and available candidates should be submitted to the contact person who will then schedule individual appointments with the Learning Provider who will interview each candidate and conduct assessments.

2. The Learning Provider can recruit at the facility in an area open to employees such as the staff lunch room or lounge. Posters can be hung up, fliers distributed and educational personnel can be available to answer questions and sign students up. The activities department can play an active role in recruitment by decorating the home and advertising the program in advance. The goal is to get out as much accurate information as possible and to get the whole facility buzzing about the program--staff and residents alike. The more knowledgeable, enthusiastic and supportive the environment, the more willing prospective participants will be to come forth.

3. Insert program flyers into employee paycheck envelopes informing employees when, where and how interested persons can inquire about the program and sign up. Flyers with translations in the dominant languages represented at the workplace are most desirable. Bilingual employees would most probably be delighted to translate a simple flyer which can be copied and distributed with little cost.

4. Hold an open house for all staff and residents. Decorate the facility with cultural awareness posters and program information. Serve cold drinks and pastries and have a speaker give a brief informal talk about the program. Have a sign-up table and people circulating who would be able to answer questions and give out more details.

5. The nursing home can require limited English new-hires to attend the ESL class as part of their job. This does two things: It allows the facility to consider a wider range of candidates and provides added incentive to individuals to apply for work at this particular facility. In addition, requiring attendance at the ESL class as part of the job requirement is not the same as requiring employees who are already functioning on the job to attend. The new hire knows of the requirement before accepting the position and can either accept it or reject it from the beginning.

6. Advertise in the local TV/radio stations in the languages of the limited English residents in the vicinity of the nursing home. Let local residents know what is available and how to find out more about it.

The Assessment Process follows Recruitment. There are two types of assessments that have to be conducted. One is a needs assessment of the language skills which employees must master in order to function effectively in the nursing home. The other is an assessment of the English proficiency of the individuals who are interested in participating in the program. The needs assessment started with the initial meetings with the nursing home administration and the orientation with the supervisors. However, in order for the job-specific language needs of the facility to be addressed by the ESL program, the Learning Provider must conduct an occupational task analysis. At this time, the nursing home contact person plays a vital role in allowing the Learning Provider to gain access to the facility without interrupting ongoing daily routines. From the information gathered here, a customized job-specific curriculum and vocabulary for the individual nursing home will be designed. This customization process and the job-specific character of the content of the ESL class plays a vital factor in the success of the program. In order for employees to begin to increase their vocabulary and their ability to function in English on the job in a relatively short period of time, the vocabulary and lesson content of the ESL class must reflect the communicative needs of: the nursing home as a long term health care provider, the supervisors who want and need to communicate with their staff, and the individual program participants who want and need to function well on the job. A more general approach to teaching ESL at work will fail to address the very job-specific

communicative needs which have resulted in putting together an ESL program in the first place.

The student assessment involves measuring the English proficiency of the individual candidates who wish to participate. It is recommended that candidates be interviewed and tested individually. (It is important to go into the assessment process with an understanding of how many and what kind of classes are to be held. Will there be one multi-level class with an open admission policy or is a particular group targeted, such as employees who need basic oral skills in order to ask and answer questions and to respond appropriately to requests and instructions from supervisors and residents.

There are several standardized assessment tests on the market, each with strengths and weaknesses. The Learning Provider may choose one of these or may have its own in-house instrument. What is important, however, is that the test be relevant to the language needs of the workplace and not just a test for the sake of testing. The usual length of time for such an assessment ranges from thirty minutes to a hour or longer per client. The length of time may vary depending on the English proficiency of the person being tested.

The nursing home contact person plays a vital role in the part of the assessment process also by not only scheduling the candidates for their assessment appointment during company time but by arranging for release from and coverage for their duties.

## Curriculum and Materials Development

As there are no nursing home-specific ESL materials on the market to date, curriculum and materials development will be ongoing throughout the project. For this reason, it is very important that the Learning Provider chosen be experienced in job-specific ESL program design and materials development.

Here are some suggested reference books:

1) A Guide to ESL Literacy, Community Learning Center, Cambridge, MA, 1986. (Phone for free copies.)

2) Auerbach, Elsa and Nina Wallerstein. ESL for Action: Problem Posing at Work. Reading, MA: Addison-Wesley, 1987.

3) Barndt, Deborah. English at Work: A Tool Kit for Teachers. Care Foundation, North York Board of Education, North York, Ontario.

4) Belfiore, M. E. and B. Burnaby. Teaching English in the Workplace. Toronto: OISE Press, 1984.

5) Parnwell, E. C. Oxford Picture Dictionary of American English. New York: Oxford University Press, 1984.

6) Robinson, Catherine and Jenise Rowe Kamp. Speaking Up at Work. New York: Oxford University Press, 1985.

7) Wallerstein, Nina. Language and Culture in Conflict: Problem-Posing in the ESL Classroom. Reading, MA: Addison-Wesley, 1983.

## The ESL Instructor

There are a variety of qualifications and characteristics which enable a teacher to teach adults ESL in a nursing home environment. The teacher must have:

1. An attitude of respect for adult learners as adults who bring with them to the ESL class a plethora of work and life experiences and prior knowledge which should be drawn on in the learning environment.

2. Experience teaching ESL at work where lesson content and vocabulary are drawn from the work environment.

3. Creativity in designing and adapting lessons and tests appropriate for adults who work.

4. Commitment to the ESL class as a vehicle to contribute to and enrich the environment of the long term health care facility.

5. An ability to feel comfortable and at ease in the nursing home.

6. Familiarity with the operation of a long term health care facility and/or a willingness to learn.

## Language Coaching

In addition to the four hours per week of in-class ESL instruction, it would be ideal to match each class member with a language coach. The role of a language coach is primarily to provide an out-of-class opportunity for the ESL student to practice speaking English.

Additional benefits are opportunities to:

1. Bridge culture gaps

2. Foster friendly relationships at work

3. Transform and unify the shape of the workplace

4. Aid limited English speaking workers as they adjust to working in the USA.

Supervisors and co-workers can all be language coaches. The only requirements are that the coaches speak and understand English well, are enthusiastic, and want to participate. Residents who are in good physical health should be invited to participate as well.

The nursing home designated contact person can recruit prospective coaches from among the staff and residents. An orientation should be held to give an overview of the language coaching program and to answer questions. A popular misconception is that a language coach or tutor must be highly skilled in English grammar and/or having teaching experience. As this is not the case, all wrongly preconceived notions about what is required can be dispelled at the orientation.

Here are some format suggestions:

1. Language coaching appointments should be held at least once a week for at least a half an hour. If time permits, participants can meet more often.

2. The time and location must be agreed upon by the facility, the coach and the ESL student. One suggestion is for the staff coach and the ESL student to donate a 15-minute break and for the facility to match the 15-minute break, thereby releasing a half-hour time period in which coaching can take place with no loss of pay to either party.

   A quiet place away from interruption is beneficial. Unscheduled conference rooms or offices are very convenient. In the case of a resident tutor, the client can go easily to the resident's room for the session.

   It is the responsibility of the designated contact person to schedule the time and location for language coaching and to oversee it for the first few weeks until everyone gets used to the schedule.

3. The ESL class instructor should assign specific language tasks to be carried out during the coaching periods. This will alleviate stress, especially in the initial encounters. Later on, it is hoped that once friendships have developed, that conversation will flow more naturally.

4. The Learning Provider should keep in contact with the language coaches to answer questions, get feedback, and provide a support system.

* Note: A possible problem that could arise is the difficulty in keeping appointments. Workers involved in patient care may be unable to leave the floor on time for scheduled appointments, an appointment may fall on a scheduled day off, or someone may call in sick. Therefore, it is crucial that participants be flexible and understanding while doing their best to keep appointments. In addition, it is important to notify language partners when one is unable to keep an appointment and be prepared to reschedule.

Exchanging home phone numbers and work extension numbers can greatly facilitate this process. In addition, supervisors can be of great help in passing information on to resident coaches and peer coaches when one of their workers is unable to keep an appointment. If those participating remember to be courteous and considerate in notifying language partners of necessary change, a lot of problems can be avoided.

## What Can Go Wrong and What Can Be Done About It?

Problems tend to be grouped in the following categories.

Problem #1 - The supervisory staff and peer co-workers resent having to cover for program participants during the paid release time they are in class.

It is quite possible that non-participants may well feel as if they have been left holding the bag while co-workers are getting paid to study. This is why the initial orientation process is vital. Before the onset of the program, the nursing home administrator and the learning provider must take the time to discuss the program with key staff members and to try to involve them in the program as much as possible. They must be given the opportunity to give input into the program design, including the time and days that the class will meet. When supervisors feel they have a voice in the program and that some of their goals may be met, they will be more likely to support the program and in turn encourage other staff members to be supportive to those participating. The greater the involvement of the supervisory staff, the less likely resentment will develop among co-workers.

For this reason, involving supervisors and co-workers in the language coaching aspect of the program can be of great benefit to all concerned. This way, everyone becomes an active participant in the program. (Please see the section on Language Coaching.)

Problem #2 - High worker turnover rate makes the ESL class very unstable.

Because of high employee turnover rate, members of the ESL class may leave the job and, therefore, leave the class before completion.

The ESL class, however, can work to combat employee instability by giving limited English employees an added incentive to stay on the job.

In any event, it is important that the ESL class instructor be informed of the situation and encouraged to set weekly class goals. The class must be designed for maximum flexibility so that ongoing enrollments and early exits will not immobilize instruction, discourage other students and upset the teacher. Because recruitment will be ongoing, the impact of taking in new students must be kept at a minimum. This is another reason why the learning provider and the ESL class instructor must be experienced, flexible and committed.

Problem #3 - Cultural and racial issues may surface.

This should be seen not as a problem but as an opportunity to discuss issues that have existed long before the implementation of the ESL program. In this light, the ESL program can provide a context in which to discuss feelings and attitudes employees have about working side by side with people from other cultures and language backgrounds. This is an excellent opportunity which should be seized and made the most of.

One approach is to provide workshops, seminars or in-services on cross-cultural awareness. It is suggested that separate workshops be held for native English speaking employees and employees whose first language is other than English.

The workshop for the native English speaking employees should bring about an awareness of American culture, values and expectations in light of the multi-cultural nature of the work environment while sensitizing employees to the difficulties of living and working in a foreign environment.

Workshops for employees whose first language is not English should include information on American culture, work ethics and employer-employee relationships and expectations.

In this way, what may have started out as a problem has become an opportunity to foster good working relationships between employees of diverse cultural backgrounds.

## Sample ESL Lesson

The following story, "The Problems of Christine Johnson," was written by the employees of a nursing home who attend an English as a Second Language class. The speaking, reading, and writing activities on the next page have been developed for and from the student generated material.

### THE PROBLEMS OF CHRISTINE JOHNSON

Christine Johnson is an old woman. She lives in an old farm house in Marlboro, Massachusetts. She lives alone in her house. Christine is 83 years old. She stands in front of her bedroom window and feels a little sad. She thinks about her parents. They are dead. She thinks about her husband and he is dead. She thinks about her family. She has no family. Oh, she feels sad.

It is a beautiful Spring day in April. Her bedroom is beautiful, but she must leave her house. She has no money. In 1970, she had a lot of money. She had good loving husbands. She had a good life. Now, it is April 2, 1988 and she has no money. Now she is poor. Oh, she wants to be rich again. Christine remembers her three husbands. Husband number one was poor. He went to war and died. Husband number two was rich, but sick. He lived for three years. Husband number three was wonderful. He was rich and he loved Christine very much. They were very happy together. They were married for a long time. They were rich and happy.

Christine is a poor widow. She is confused. Sometimes she thinks that her husband is coming home for dinner. Sometimes she thinks she is still a rich woman. She forgets she wears glasses and she thinks the glasses are not her glasses.

In a few days she will be going to a nursing home. She doesn't want to leave her farm house. She must leave her house because she has no money. She forgets to cook for herself. She forgets where she lives. She can't drive anymore. The nursing home will be a good place for her to live. She will get breakfast, lunch and dinner. She will meet new people. She is a good woman and people in the nursing home will like her.

Christine will have a new place to live.

THE END

Answer the questions:

1. What is the title of this story?_____

2. How old is Christine?_____

3. Where does Christine live?_____

4. What are Christine's problems?_____

_____

5. Where will Christine be living?_____

6. Is Christine rich?_____

7. Does Christine have a family?_____

8. Do you think Christine will be happy in the nursing home?_____

After reading the story-

<u>Topics for discussion</u>:

1. What must a new resident in a nursing home learn? Name three things a new resident should know.

2. Name ten things a new resident should bring to the nursing home. Is there anything that the new resident should not bring?

3. What would happen to Christine Johnson if she lived in your country?

<u>Homework and other activities:</u>

1. Change Christine Johnson to Michael Johnson and rewrite the story. (Change nouns and pronouns such as husband to wife, she to he, widow to widower.)

2. Underline the verbs. Then, change the underlined verbs to the past tense.

3. Change the ending of the story. Write a story about one of Christine's three husbands and tell the class.

## NURSING HOME VOCABULARY

On the following pages is a working vocabulary for nursing home employees. It is open ended with the intention that teachers and students will add to it and reshape it to meet their needs.

This vocabulary is probably the minimum list of words employees in various departments must know and understand.

## NURSING HOME STAFF JOB TITLES VOCABULARY

Administrator

Assistant Administrator

Director of Dietary

(Food Service Supvr.)

Head Cook

Cook

Dietary Aide

Director of Laundry

Responsible Person

Laundry Aide

Director of Nurses

Assistant Director of Nurses

Shift Supervisor

Charge Nurse (Head Nurse)

Medications Nurse

Nursing Assistant

Director of Housekeeping

Housekeeper

Floor Care Person

Activities Director

Maintenance Supervisor

Assistant Maintenance Person

Physical Therapist

Director of Social Services

Social Services Assistant

Director of Staff Development

Personnel Manager

Business Office Manager

Bookkeeper

Receptionist

## NURSING HOME OFFICE/CLERICAL VOCABULARY

charts

pencil

paper

pen

ruler

pencil sharpener

stapler

staples

tacks

paper clips

magic markers

tape (dispenser)

pad of paper

glue

typewriter

word processor

computer

copy machine (Xerox)

copy paper

schedules

time sheets

time clocks

shift

white out

eraser

desk

chair

blotter

pay checks

pay stubs

payroll

pay day

report

page

paging

intercom

telephone

Verbs

respond

answer

call in

call out

pick up

get

report to

schedule

punch in

punch out

copy

xerox

page

announce

## NURSING HOME PHYSICAL SPACE VOCABULARY

parking lot
front entrance
exit
front lobby (reception area)
offices
desk
bathroom
hall (corridor)
cafeteria
dining room
staff lounge
activities room
arts and crafts room
kitchen
lawn
front steps
front walk
ramp

resident rooms
room number
wing
floor
north
south
east
west
first
second
third
fourth
elevator
fire door
fire exit
stairs
stairway
delivery entrance

## NURSING HOME PHYSICAL SPACE VOCABULARY

**Verb**

enter

exit

go

come

walk in

pull

push

want

need

help

look

look for

look in

look out

open

close

take a walk

take a ride

wheel

get in

get out

get on

## RESIDENT'S ROOM VOCABULARY

bed bedrail

bed linens

bedside table

(night table)

lamp

overbed table

dresser

drawers

mirror

privacy curtains

closet

closet door

door knob

blanket

sheets

pillow case

extra blanket

hanger

name tag

chair

wheelchair

walker

T.V.

radio

wastebasket

light switch

bed pan

clipboard

## RESIDENT'S ROOM VOCABULARY

**Charts**

bladder training

personal items inventory

daily living activities

**Bathroom**

toilet

shower

sink

mirror

shelf

tub

towels

wash cloths

razor

shaving cream

**Verbs**

open

close

reach

grab

get

bring

get down

put in

take out

clean

organize

arrange

dust

mop

scrub

tidy up

hang up

sweep

turn on

turn off

## MEDICAL PERSONNEL VOCABULARY

nurse

Registered Nurse (R.N.)

Licensed Practical Nurse (L.P.N.)

nurse's aid

nurse's assistant

doctor

physician

general practitioner (G.P.)

geriatrician

dentist

surgeon

anesthesiologist

radiologist

urologist

optometrist

ophthalmologist

podiatrist

psychiatrist

psychologist

cardiologist

pathologist

neurologist

chiropractor

dermatologist

allergist

druggist

dietician

## MEDICAL AND CHARTING VOCABULARY ABBREVIATIONS

c - with

s - without

a - before

p - after

et - and

ad lib - as desired

A.D.L. - activities of daily living

BID - twice a day

TID - three times a day

QID - four times a day

qd - every day

BM - bowel movement

B.R.P. - bathroom privileges

cc - cubic centimeter

FBS - fasting blood sugar

$H_2O$ - water

L - left

R - right

P.O. - by mouth

N.P.O. - nothing by mouth

NA - salt

p.r.n. - as necessary

ROM - range of motion

R.O. - reality orientation

spec. - specimen

STAT - immediately

w/c - wheelchair

c/o - complains of

<u>Prefixes</u>

a - from, without

ante - before

anti - against

contra - against, opposed

post - after

## MEDICAL AND CHARTING VOCABULARY

abdomen
ambulatory
atrophy
axillary
bacteria
bedpan
body mechanics
colostomy
constipation
contracture
decubitus ulcers/bed sores
dehydration
dentures
diarrhea
emesis
emesis basis
enema
fever
fluid balance
fluid intake
force fluids
fracture
graduate
impaction
incontinence
inflammation
joint
oral
patient unit
pulse
respiration
sitz bath
specimen
sputum
stoma
suppository
temperature
thermometer
transfer
urinal
urinalysis
urinate
vital signs
void
vomiting

## ACTIVITIES FOR DAILY LIVING VOCABULARY AND EXPRESSIONS

**Color Changes**

redness

blueness

graying

blackening

white spots

**Texture Changes**

roughness

scaling

graining

**Injuries**

bruises

scratches

scrapes

cuts

burns

infection

**Growths**

moles

warts

tumors

calluses

corns

**Sores**

decubitus ulcers

bedsores

pressure sores

very red sores

blackened sores

open sores

proper body alignment

proper positioning

stooping

slumping

curving

incontinency

incontinent

bowels

## ACTIVITIES FOR DAILY LIVING VOCABULARY AND EXPRESSIONS

**Verbs**

protect
remove
change
position
balance
feed
document
decline
report
chart
record
offer
remind
drink
encourage

to be up
to get up
attend
bathe
follow
inspect
irritate
become
neglect
heal
massage
rub
circulate
oil
watch

ACTIVITIES FOR DAILY LIVING VOCABULARY AND EXPRESSIONS

Areas of Skin to Inspect Frequently

hairline and scalp

elbows

hands and nails

face and neck

skins and calves

back and buttocks

under the arms

behind the ears

genitals and anus

under the breasts

knees

any injured area

any area under pressure

any rashes

## ACTIVITIES FOR DAILY LIVING VOCABULARY AND EXPRESSIONS

personal hygiene

grooming

dressing

eating

exercising

eliminating waste

products

skin care

protection

aging

more fragile

less elastic

dry/drier

loss of sensitivity

temperature

pain

susceptibility

decubiti (bed sores)

balanced diet

proper positioning

gradual decline in food intake

continual poor intake

charge nurse

regular bowel functions

regular bladder functions

record daily functions

irregular functions

decline in functions

change in functions

sufficient fluid intake

accessible

throughout the day

offer fluids frequently

adequate physical activity

exercise groups

remind patients to drink

inspect skin frequently

irritated area

until it is too late

condition

severe

breakdown of tissue

tight clothing

loose clothing

free from wrinkles

smooth

## HEALTHCARE VOCABULARY

medicine
vitamin
pills
aspirin
nose drips
cough drops
cough syrup
eye drops
laxative
suppositories
iodine
alcohol
vaseline
chapstick
shampoo
soap
toothpaste
toothbrush
thermometer
band-aid
bandage
sterile cotton
adhesive tape
tissues (Kleenex)
toilet tissue
gauze
dressing
sponges
cotton balls
cotton swabs

**Verbs**

bandage
clean
dry off
medicate
sterilize
check
rub
apply
take
swallow
brush
put on
take off
lubricate
wash
dry

## ILLNESS AND AILMENTS VOCABULARY

constipation

diarrhea

incontinence

indigestion

enema

emesis (vomiting)

a toothache

a stomachache

a headache

an earache

a sore throat

a cold

a cough

a rash

an infection

inflammation (swelling)

a nosebleed

"aches and pains"

arthritis

abscess

allergies

high blood pressure

influenza (the flu)

broken bones

brittle bones

hemorrhage

bleeding

paralysis

shock

malignant tumor

benign tumor

cancer

cataracts

angina (heart attack)

stroke

glaucoma

hepatitis

hysteria

pneumonia

## ILLNESS AND AILMENTS VOCABULARY

**Verbs**

examine

look at

set (referring to bones)

medicate

cure

alleviate

stop

bandage

remove

operate

treat

restrain

stop

bandage

remove

operate

treat

restrain

## BODY PARTS VOCABULARY

brain
heart
lungs
liver
kidneys
intestines
throat
windpipe
bladder
muscles
veins
arteries
skin
bones
skull
collar bone
shoulder blade
breastbone
ribs
backbone/spine
kneecap
hipbone/pelvis
hair
head

neck
throat
moustache
beard
shoulders
chest
breasts
back
waist
stomach
abdomen
hips
buttocks
arms
armpits/underarms
upper arm
elbow
forearm
hand
wrist
fingers
thumb
palm
finger nails

## BODY PARTS VOCABULARY

toe nails
legs
thighs
knees
calves
ankles
foot/feet
heel
sole
toes
arch
instep
face
nose
ears
cheeks
chin
mouth
forehead
temple
jaw
lips
tongue
tooth/teeth
gums
eyes
eyeball
eyebrow
eyelid
eyelashes
pupil
iris
retina

## HOUSEKEEPING

**Objects Found on the Housekeeper's Cart**

Windex

Air freshener

Cleanser (brand names used - Comet)

Germicidal disinfectant bathroom cleaner

(brand names used - Goodby)

Lemon oil furniture polish

Polybags (small and large sizes of trash can liners)

Bedside bags (paper trash bags attached to patient's bed for convenience)

Small plastic bucket (used for all purpose cleaning)

Mop (wet)

Dry mop

Bucket with wringer

Dust pan

Brush

Feather duster

Scraper (putty knife used to remove residue from surfaces)

Toilet brush

Rubber gloves

Toilet bowl cleaner (removes rust build-up in toilet bowl)

Rolls of paper towels

Rolls of toilet paper

HOUSEKEEPING/FLOOR CARE

## Special Projects

"Room for a day"

Remove all furniture from room

Take down the drapes and take them to the laundry

Remove the cubicle curtains and take them to the laundry

Wash the walls

Take down the light fixtures and wash them

Dust and polish all the furniture

Put up clean drapes

Put up clean cubicle curtains

Replace the furniture

"Other Projects"

1. Take down light globes or fixtures to wash and replace
2. Take down cubicle curtains and replace or check the hooks
3. Repair the wall paper
4. Floors stripped and waxed

## FLOOR CARE

Major areas of nursing home facility:

Center area: Main entrances

Time clock area

Patient dining room

Stairs

Floors - Each floor containing hallway, patient rooms, and public gathering areas.

Machines:

1. Scrub washer (pads are made of coarse, wirelike material)
   - Use black pads for stripping wax from floor.
   - Use green pads for scrub washing the floor.

   Scrub washing removes the dirt embedded in the wax. It temporarily dulls the wax shine.

2. Buffer

   Use white or light blue pads to shine/polish the wax finish.

   Pad holder on buffer

   - Plastic circle that fits pad to machine.

     Every 2 - 3 days pads must be changed.

     The pad holder must be removed, the old pad thrown away and a new pad put on it.

| | |
|---|---|
| Safety card | Caution |
| Safety boots | Wet floor |
| Uniform | Signs |

## HOUSEKEEPING/FLOOR CARE VOCABULARY

**Verbs and Expressions**

Wash

Clean

Dust

Vacuum

Empty the trash

Put on the tablecloths

Put on the sheet

Fill the paper towel dispenser

Clean up the mess

Dust and polish the furniture

Clean the mirror with Windex

Disinfect the bathroom and fixtures

Pick up

Remove the sheets and pillow cases

Clean behind

Straighten out the cart

Wash down the cart

Collect the laundry

Take down the cubicle curtains and take them to the laundry

Get

Run out of

Finish

Need

Done

Can you tell me ...

Excuse me ...

Flip the mattress

Messed up

Spill

Throw away

Turn on

Turn off

Shine

Polish

Buff the floor

Strip the wax

Scrub the floor, bathroom

Change the sheets

Change the pad on the buffer or scrubwasher

Climb up the ladder

Climb down the ladder

## LAUNDRY VOCABULARY

laundry basket

laundry carts

automatic washer

automatic dryer

button

buckets (hamper on wheels)

Chux (incontinent pad)

sheets

towels

washcloths

johnnies

clothing

cloths

linen

pillow case

laundry bag

laundry marker

paging

intercom

elevator

detergent

soap

soil

heavy soil

stain

stain remover

bib

Verbs

collect

pick up

deliver

grab

fold

wash

dry

empty

full

push

start

stop

fill

load

overload

CLOTHING AND OTHER PERSONAL ITEMS VOCABULARY

WOMEN AND GIRLS

| Undergarments | Sundry Items |
|---|---|
| brassiere | deodorant |
| bra | face cream |
| underpants | perfume |
| panties | powder |
| panty hose | soap |
| stockings | shampoo |
| slip | hair conditioner |
| half slip | hair spray |
| garter | hair mousse |

| Jewelry | Make-Up (cosmetics) |
|---|---|
| * ring | mascara |
| * bracelet | nail polish |
| * earring | eye shadow |
| * necklace | face powder |
| * tie clip | lipstick |
| pin | blush |
| | eye liner |
| | eyebrow pencil |

*items worn by both genders

## CLOTHING AND OTHER PERSONAL ITEMS VOCABULARY

### WOMEN AND GIRLS (continued)

| Miscellaneous Items | Verbs |
|---|---|
| hair rollers/curlers | put on |
| hair clips | take off |
| hair combs | zip up/unzip |
| * comb | button/unbutton |
| * brush | tie/untie |
| * tweezers | hang up |
| * nail clippers | wear |
| * social security card | buy |
| purse | |
| pocketbook | |
| handbag | |
| * wallet | |
| change purse | |
| jewelry box | |
| * pill box | |
| compact | |
| * nail file | |
| * toothbrush | |
| * scissors | |
| * radio | |
| * T.V. | |

*items used by both genders

## CLOTHING AND OTHER PERSONAL ITEMS VOCABULARY

### MEN AND BOYS

**Undergarments**

underpants
shorts
briefs
jockey shorts
undershirt
T-shirt

**Clothing**

* bathrobe
* pajamas
night shirt
socks
pants
slacks
trousers
jacket
sport coat
suit
suit jacket
suit pants
suit vest
3-piece suit
sweater
turtleneck
* cardigan sweater
jeans
shirt
* zipper
* tie
* collar
* cuff
* sleeve
* raincoat
* trench coat
* hat
* gloves
* mittens
* scarf
* overcoat
* lapel
* pocket

*items worn by both genders

## CLOTHING AND OTHER PERSONAL ITEMS VOCABULARY

### MEN AND BOYS (continued)

**Clothing**

* swim suit
* bathing suit
trunks
* sweat suit
* sweat shirt
* sweat pants

**Miscellaneous**

* belt
* belt buckle
* watch
* watch band
* glasses
* umbrella
* cuff links
* buttons
* briefcase
* attache case
* tie clip
* social security card
* razor
* shaving cream

**Footwear**

* shoes
* boots
* rubber boots
* totes
* rubbers
galoshes
* sneakers
* tennis shoes
* loafers
* slippers
* shoe laces

**Verbs**

put on
take off
zip up/unzip
button/unbutton
tie/untie
hang up
wear
buy

*items worn or used by both genders

## FAMILY VOCABULARY

wife
husband
mother
father
sister
brother
daughter
son
grandchildren
grandparents
aunt
uncle
niece
nephew
cousins (first and second)
in-laws
step-children
step-parents
extended family
wedding
funeral

**Verbs**

visit
be related
marry
divorce
separate
be born
die
live
live with
be related to
get married
marry
get divorced
divorce
separate
be separated
move in with
move out

## DESCRIPTIVE ADJECTIVES AND VERBS

**Vocabulary**

friendly
kind
mean
thoughtful
delightful
funny
serious
"a pain"
dedicated
loving
hard working
lazy
smart
intelligent
wise
stupid
boring
beautiful
ugly
absent-minded
punctual
demanding
truthful
bright
loud
quiet
generous
worried
outgoing
shy
"macho"
polite
stubborn
patient
stingy
fair
vain
modest
happy
cheerful

## DESCRIPTIVE ADJECTIVES AND VERBS

| Vocabulary (continued) | Verbs |
|---|---|
| peaceful | laugh |
| content | frown |
| pleased | argue |
| surprised | quarrel |
| excited | take it easy |
| confident | cry |
| afraid | smile |
| scared | scream |
| unhappy | hate |
| sad | |
| depressed | |
| angry | |
| mad | |
| dull | |
| nervous | |
| bored | |

**Colors Vocabulary**

red
green
brown
pink
orange
blue
black
white
yellow
purple
gray
tan
aqua
beige
maroon
turquoise
baby blue
army green

**Seasons Vocabulary**

spring
summer
fall
winter

**Months Vocabulary**

January
February
March
April
May
June
July
August
September
October
November
December

Days of the Week

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

## HOLIDAYS VOCABULARY

| | |
|---|---|
| New Year's Day | |
| Martin Luther King Day | 3rd Monday in January |
| President's Day | 3rd Monday in February |
| Good Friday | |
| Easter | |
| Mother's Day | 2nd Sunday in May |
| Memorial Day | last Monday in May |
| Father's Day | 3rd Sunday in June |
| Independence Day | July 4th |
| Labor Day | 1st Monday in September |
| Columbus Day | October 12 |
| Halloween | October 31 |
| Veteran's Day | November 11 |
| Thanksgiving Day | last Thursday in November |
| Christmas | December 25 |

## KITCHEN VOCABULARY AND EXPRESSIONS

### Kitchen Machinery, Tools and Other Objects

slicer
mixer
blender
fire extinguisher
fan
coffee maker
coffee pot
stove
oven (convection oven)
microwave
broiler
can opener
toaster
garbage disposal
dishwasher
refrigerator
freezer
steamer (steam table)
dish lowerators
food trucks
trays
carts

condiment wagon
dish dolly
4-ounce racks
8-ounce racks
barrels
work table
sink
work station
bulletin board
wells
mop
silverware bucket
patient diet cards
the line
counters
shelves
tilting skillet
cutting boards
cutlery rack
food storage bins
garbage cans

## KITCHENWARE AND UTENSILS

silverware
fork
knife
spoon
teaspoon
tablespoon
serving spoon
cup (lid)
saucer
cereal bowl
sugar bowl
placemat
napkin
strainer (china cup)
ladle
soup bowl
nappy dishes (dessert dishes)
half pans
6-inch pans
4-inch pans
2-inch pans
spatula
cheese grater
pot
fryer
4-ounce juice glasses
8-ounce milk glasses
dish towels
salt and pepper shakers
pitchers
sheet pans
plate
lip plate
puree dishes
paper products

## WAYS TO PREPARE FOODS

| | |
|---|---|
| baked | microwaved |
| mashed | scrambled |
| roasted | toasted |
| fried | steamed |
| deep fried | pureed |
| sauteed | fileted |
| broiled | poached |
| boiled | ground |
| blanched | finely chopped |
| raw | sliced |
| thawed | chilled |
| frozen | stewed |
| reheated | simmered |

## KITCHEN VOCABULARY AND EXPRESSIONS

| Food | Source |
|---|---|
| 1. beef | 1. cow |
| 2. steak | 2. cow |
| 3. hamburger | 3. cow |
| 4. veal | 4. calf |
| 5. sausage | 5. cow, pig |
| 6. chicken | 6. chicken |
| 7. mutton | 7. sheep |
| 8. lamb | 8. lamb |
| 9. turkey | 9. turkey |
| 10. pork | 10. pig |
| 11. ham | 11. pig |
| 12. bacon | 12. pig |
| 13. hot dog | 13. pig, cow, chicken |
| 14. eggs | 14. chicken |

## POPULAR FOOD SERVED IN THE UNITED STATES

sandwiches

pizza

spaghetti

hamburgers

(cheeseburgers)

french fries

meatloaf

tuna noodle casserole

macaroni and cheese

toast

peanut butter

and jelly sandwiches

salad

chef salad

toast

crackers

pancakes

waffles

hash browns

biscuits

omelets

American chop suey

hot dogs

chili dogs

chili

shepherd's pie

submarine sandwiches

"subs"

grinders

## KITCHEN VOCABULARY AND EXPRESSION

**Vegetables**

potatoes
sweet potatoes
carrots
broccoli
cauliflower
spinach
peas
beans
corn
onions
squash
(zucchini)
(acorn)
(yellow)
artichokes
avocados
plantains
parsley
parsnips
cabbage
lettuce
cucumbers
brussels sprouts
radishes

**Fruits**

tomatoes
apples
pears
bananas
oranges
pineapples
coconuts
grapefruits
grapes
plums
mangoes
nectarines
peaches
tangerines
watermelons
cantaloupes
honeydew melons

**Breads - Buns - Rolls**

white

whole wheat

rye

pumpernickel

oatmeal

raisin

bran

banana

nut

**Muffins**

blueberry

bran

corn

apple

English

**Milk Products**

milk

yogurt

cream

cheese

**Cereals**

Hot Cereals

oatmeal

cream of wheat

cream of rice

Maltex

Farina

**Cold Cereals**

corn flakes

Grape-Nuts

raisin bran

Rice Krispies

**Grains**

rice

wheat

rye

bran

**Salads**

cole slaw

tossed green

pasta

potato

macaroni

fruit

**Meals**

breakfast

lunch

supper

dinner

brunch

snack

**Salad Dressings**

French

Italian

Greek

ranch

"house"

mayonnaise

chantilly

## DRINKS

**Coffee**

decaffeinated coffee

instant coffee

iced coffee

**Milk**

skim milk

low fat milk

chocolate milk

milkshake (frappe)

hot chocolate

**Tea**

decaffeinated tea

herbal

iced tea

**Juice**

orange

apple

grapefruit

cranberry

fruit

lemon (lemonade)

tomato

pineapple

carrot

**Soda**

Coke

Pepsi

Sprite

7-Up

Slice

ginger ale

(diet)

(caffeine free)

**Flavors**

chocolate

vanilla

strawberry

raspberry

blueberry

lemon

maple

butterscotch

malted

**Soups**

chicken

beef

creamed

vegetable

minestrone

spinach

mushroom

clam chowder

corn chowder

fish chowder

potato

tomato

"soup of the day"

chicken broth

beef broth

**Desserts**

cake

pie

jello

ice cream

sherbet

cookies

candy

applesauce

fruit

custard

brownies

fruit cocktail

popsicles

**Condiments**

salt

pepper

**Miscellaneous**

salad dressing

cream

sugar

bacon bits

croutons

pickles

**Spreads**

peanut butter

jam

jelly

preserve

butter

margarine

mayonnaise

marshmallow spread

mustard

ketchup (catsup)

**Sauces**

tomato

cheese

pesto

lemon

tartar

cranberry

| Foods | Crackers |
| --- | --- |
| soups | graham |
| meat | saltines |
| fish | milk lunch |
| poultry | Ritz |
| eggs | wheat thins |
| cheese | stone ground wheat |
| fruits | |
| vegetables | Gravies |
| breads and cereals | beef |
| desserts | chicken |
| beverages | |
| sauces | Syrup |
| gravies | maple |
| condiments | chocolate |
| | strawberry |

## THERAPEUTIC DIETS ORDERED IN LONG TERM CARE

regular

puree

mechanical soft

low salt

clear liquid

full liquid

bland

low fat

low cholesterol

high protein

tube feeding

calorie-controlled

low-calorie

high-calorie

diabetic

<u>Diet Vocabulary</u>

well-balanced diet

nutrients

nutritional requirements

texture

altered

solid-formed meats

calories

restricted calorie intake

carbohydrates

fats

proteins

sugar

naturally high in salt

bacon

ham

cheese

canned soups

luncheon meats

salt packets

meet daily nutritional requirements

make easier for food to be chewed and digested

diabetics

weight reduction

minimize fluid retention

circulation

hypertension

kidney disease

heart disease

**Verbs**

provide
alter
require
control
balance
contain
add
limit
meet
make
order
restrict
gain
minimize
retain
hinder
circulate
chew
digest
reduce

## RESOURCES

Commonwealth Literacy Campaign
Registry of Motor Vehicles Building
100 Nashua Street, 9th floor
Boston, Massachusetts 02114

Sondra Stein, Ph.D., Deputy Director
Telephone (617) 727-5717

The Commonwealth Literacy Campaign is Governor Michael S. Dukakis' initiative on adult literacy.

Commonwealth of Massachusetts
Board of Library Commissioners
648 Beacon Street
Boston, Massachusetts 02215

Telephone (617) 267-9400
(800) 952-7403

The Board of Library Commissioners publishes the MASSACHUSETTS LITERACY RESOURCES DIRECTORY 1987-1988 which is a listing of Adult Basic Education classes, English as a Second Language programs, GED preparation classes and testing sites and a variety of adult learning programs in the Commonwealth.

Continuing Education Institute
163 Highland Avenue
Needham, Massachusetts 02194

Lloyd David, Ed.D., President/Director
Telephone (617) 449-4802

Continuing Education Institute (CEI) is a non-profit organization which provides a range of literacy/education programs for adults in Eastern Massachusetts.

Massachusetts Coalition for Adult Literacy
P.O. Box 547
Boston, Massachusetts 02102

The Massachusetts Coalition for Adult Literacy's goals are to increase public awareness, increase resources for adult basic education (ABE) services, and facilitate the coordination of information on available ABE services.

Massachusetts Long Term Care Foundation
886 Washington Street
Dedham, Massachusetts 02026

Lorenz J. Finison, Ph.D., Executive Director
Louise Clough, Associate Director
Telephone (617) 326-8967

The Massachusetts Long Term Care Foundation is a non-profit research and education center which promotes the increasing excellence of long term care services to the elderly in Massachusetts.

Workplace Education Program
Executive Office of Labor
One Ashburton Place, Room 2112
Boston, Massachusetts 02108

Judy Hikes, Workplace Education Program Coordinator
Telephone (617) 727-6573

The Workplace Education Program is a joint initiative of the Executive Office of Labor, the Division of Employment Security, and the Department of Education, in Association with the Commonwealth Literacy Campaign. The Massachusetts Long Term Care Foundation's Nursing Home ESL project described in this manual was a Workplace Education Program project.